

Employee Survey

Acme Dynamite Co. Reemployment Committee

WorkSource/King County Dislocated Workers Program
King County's Community & Technical Colleges
Washington State Employment Security Department
Reemployment Support Center, Worker Center AFL-CIO

All information in this survey is confidential and optional. It will be used for statistical information to help provide services for workers who are laid off.

Educational Background

- ☐ 8th grade or less
- ☐ 9th - 11th
- ☐ High School Diploma or GED
- ☐ Some College/Vocational Courses
- ☐ AA Degree
- ☐ BS or BA Degree or Higher

Age

- ☐ Under 21
- ☐ 22-29
- ☐ 30-39
- ☐ 40-49
- ☐ 50-59
- ☐ 60 or over

Gender

- ☐ Male
- ☐ Female

City You Live In _____

Employment Information

How long have you worked here?

- ☐ Less than 1 year
- ☐ 1-5 years
- ☐ 6-10 years
- ☐ 11-15 years
- ☐ 16-20 years
- ☐ More than 20 years

What is your hourly wage?

- ☐ 8.99 or less
- ☐ 9 - 11.99
- ☐ 12 - 15.99
- ☐ 16 - 18.50
- ☐ More than 18.50

Hours a week worked?

- ☐ 20 or less
- ☐ 21 - 35
- ☐ 36 - 40
- ☐ More than 40
- ☐ Temporary

What is your present job title? _____

What are the primary job skills you have used at this job? _____

What other job skills do you possess? _____

Are you the primary wage earner in your household? Is your partner employed?

- ☐ Yes
- ☐ No

- ☐ Yes
- ☐ No
- ☐ N/A

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Future Plans

To assist you during this transition period, please answer the following questions about your future plans:

When you leave, what is your immediate goal?

- ☐ To find a new job
- ☐ To enroll in training for a new career
- ☐ To find a job and enroll in training
- ☐ To enroll in training to increase present skills
- ☐ To retire
- ☐ Other: _____

Do you want assistance with:

- ☐ Employment counseling
- ☐ Interviewing skills
- ☐ Job search skills
- ☐ Reading/Writing
- ☐ Resume writing assistance
- ☐ Skill identification
- ☐ English language classes

Is there an area of training or schooling you are interested in at this time?

Would you appreciate assistance in finding resources for:

- ☐ Age-related employment issues
- ☐ Credit or debts (*please specify*) _____

- ☐ Drug and/or alcohol counseling
- ☐ Family problems
- ☐ Financial affairs/Pension questions (*please specify*) _____
- ☐ Government services (i.e. unemployment, veteran's benefits, training dollars, etc.)
- ☐ Health concerns
- ☐ Legal problems
- ☐ Medical insurance coverage
- ☐ Mortgage, rent, utilities
- ☐ Stress, mental health (*please specify*) _____

☐ Other counseling (*please specify*) _____

☐ Other issues (*please specify*) _____

Do you have any other comments or concerns to share with service providers?

Thank-you for your help!



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